



State of Louisiana
Department of Health and Hospitals
Office of Aging and Adult Services

MEMORANDUM

OAAS-ADM-10-012
OAAS-SC-10-004

TO: OAAS Regional Managers
Support Coordination Agencies

FROM: Rick Henley *RH*
Policy Division Director

DATE: April 6, 2010

SUBJECT: Service Hour Allocation of Resources (SHARe)
Annual Plan of Care Review Process

The Office of Aging and Adult Services (OAAS) implemented the Service Hour Allocation of Resources (SHARe) initiative on March 1, 2009. During the first year of implementation, OAAS granted some exceptions to application of the SHARe methodology based upon regional or state office review. If an exception was granted, the OAAS regional staff authorized the support coordinator to revise the individual's plan of care (POC) to provide additional services as needed, up to but not to exceed the maximum SHARe allocation. Also, within the first year of implementation, OAAS adjusted the SHARe monetary categories to compensate for the LA Medicaid reimbursement rate reductions. Please note that use of these adjusted SHARe allotments should result in no change in the amount of services received by individuals.

As these POCs become due for annual reassessment the following guidelines are to be used:

1. If the POC was previously approved for exception, the support coordinator may develop the new POC based on the same budget amount up to but not to exceed the current maximum SHARe allocation as long as none of the following is applicable:
 - a. reassessment indicates that the individual's functioning level has significantly improved, or
 - b. the individual has requested fewer services, or
 - c. the individual's level of informal, natural, or other community supports has significantly increased.
2. The Regional Offices are instructed to continue to grant the exception and approve the new POC based on the same budget amount up to but not to exceed the current maximum SHARe allocation, provided the support coordinator has documented that none of the above is applicable.
3. Regional Office staff will document the granting of this exception in the notebook section of the face sheet. This notebook entry shall include the following:
 - a. MDS-HC identifier #

- b. MDS-HC date
- c. The following statement: An adjustment to the plan of care (POC) has been authorized per OAAS-ADM-10-012/OAAS-SC-10-004 on (insert date here). As part of our ongoing evaluation and quality audit, we have determined that this participant's SHARe allotment shall not exceed \$XX,XXX. You are authorized to have his/her Plan of Care (POC) adjusted as necessary.

Notebook entry example:

MDS-HC ID#12345678/Date: 03/10/10 - An adjustment to the plan of care (POC) has been authorized per OAAS-ADM-10-012/OAAS-SC-10-004 on 04/05/10. As part of our ongoing evaluation and quality audit, we have determined that this participant's SHARe allotment shall not exceed \$40,822. You are authorized to have his/her Plan of Care (POC) adjusted as necessary.

C: OAAS State Office Staff
Medicaid Waiver Assistance and Compliance
DHH Legal